_	.1	CLAIMS AS FILED - PART I				· ·····································
٠.	100kmo 11					10 759,198
	FOR		(Column 2)	SMALL ENTITY		
	BASIC FEE	NUMBER FILED	NUMBER EXTRA	The County	OR '	OTHER THAN SMALL ENTITI
	TOTAL CLAUSE		SMOCK EXTRA	RATE	7	SWICE ENITH
لع	(37 CFR 1.16(c))			FEE	-	RATE
	INDEPENDENT OF MIGUS 20 - 1			1 100 15	OR	- FE
			x s 22 =	7 "	5	
	MULTIPLE DEPENDENT		x s 100_	OR	x s 50.	
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))				OR	x s 200
	· If the difference in column 1:			+5.180	7 ~ 1-	
·	"If the difference in column 1 is less than zero, enter "0" in column 2. CLAIMS AS AMENDED - PART II				J OR	+ 360
				TOTAL	1	
] OU.	TOTAL
	•	lumo 11				
	X 11 C	LAIMS	olumn 2). (Column 3)	C 4.44	•	
		MINING HIC	HEST	SMALL ENTITY	OR	OTHER THAN
	AME!	FTER PREV	MBER PRESENT MOUSLY EXTRA	RATE ADDI	1	SMALL ENTITY
	O GI CER LISCEN	Migus	DFOR	ADDI. TIONAL		RATE
	Z Independent	21		1 . FEC	1	ADD TONK
- 1	(3) OFR 1.16(b)) 2	Minus	= /	x s 25 =		- FC(
- 1	₹ FIRST PRESENTATION			x s 100=	OR XS	50
Ī	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))				OR K	200
-	(3. CFR (,16(d))			+s 180=		
				TOTAL	OR + S	360
. [(0)			AOD'L FEE	OR TOT	AL
	CLAI		(Column 3)		AD0	'L FEE
	AFTE	R	ER PRESCUE		-	
	E Total AMENDI	MENT PREVIO	USLY EXTRA	RATE ADDI-		
- [:	11 GAR CIRCH .	. Minus	= -	TIONAL	1 10	ADDI
	Midependent (37 CFR 1.16(6))	· Minus ···		x s 25 =	·	TIONAL FEE :
:	2		=		OR $x \le 5$	b. T.
\vdash	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			× s_100=	OR X S 2	
1	(37 CFR 1.16(d)) +			+5180=		
-	To			TOTAL	DR [:+3]	0Q
-	(Column	1)	•	ADO'L FEE	TOTAL	
(CLAIM	(Column	2) (Column 3)		DR ADD'L	FEE.
.15	REMAINI	NUMBER	B POESCUE			
AMENDMENT	Total AMENOME	PREVIOUS	AY EXTON	RATE ADDI-		
16	(31 OFR (.16(c))	Minus		TIONAL	RATE	A001-
1 2	Indépendent (37 CFR 1,16(6))		=	× s 25 = FEE		TIONAL
Įξ	1. 2.4 (1.0(0))	Minus	1 = 7 1-	06	x soc	FEE
A	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))			x s 100		1
_	S MOCTIFICE DEPENDENT CLAIM (31 CFR 1.16(d))			+ s 180=		<u> </u>
				1 00	+ 360	
ADD's see						(=:
If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20". This collection of information is required for Model or Independently is the proviously Paid For Model or Independently Ind						
The "Highest Number Previously Paid For IN THIS SPACE is less than 20. enter "20". This collection of information is required by 37 CFR 1.16. The information is required to appropriate box in column 1.16. The information is require						
USPT	I to process an appliant is requi	red by 37 CFR 1 16 The	indent) is the highest num	ber found in the		
indudi	no gathering and application, Co	infidentiality is access	normation is required to	oblain appropriate box in	Column 1	1 1

The Highest Number Previously Paid For (Total or Independent) is the highest number found in the appropriate box in column 1. This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the use of including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments and Trademark Office. U.S. Department of Commerce, P.O. Box 1450. Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS